PATENT APPLICATION FEE DETERMINATION RECORD  Application or Docket Number											ber	
		/	10024622									
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY				
TOTAL CLAIMS			52					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEI	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			58 minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			1 <b>(1)</b> minus 3 =					X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PR	RESENT				]	+140=	<u> </u>	1	.000	
* If	* If the difference in column 1 is less than zero, enter "0" in column 2 / L								<u> </u>	OR	+280=	
CLAIMS AS AMENDED - PART II  OR TOTAL  OTHER THAN											THAN	
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	• 54	Minus	5	8	<i>- Q</i>		X\$ 9=		OR	X\$18=	
AME	Independent	* / ( NTATION OF MU	Minus	***	1 1	<b>-</b> 0		X42=		OR	X84=	
	TING! PRESE	MATION OF MIC	JETIPLE DEF	PENDEN	CLAIM	K	J	+140=.		OR	+280=	280
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
_	11 M 1	(Column 1)		(Colu		(Column 3)	·		_			
AMENDMENT B	7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ND	Total	•	Minus	**		<b>≠</b> ·		X\$ 9=		OR	X\$18=	·
AM	Independent	* NTATION OF MU	Minus	***	CL AIM	-		X42=		OR	X84=	
	THOTPHESE	INTATION OF MIC	LIIPLE DEF	CINDEN	CLAIM		ן נ	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column'1) CLAIMS	,	(Colui		(Column 3)	1 -		4001			
AMENDMENT C	·	REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO	Total	*	Minus	**		=		X\$ 9=	٠	OR	X\$18=	
AME	Independent	* INTATION OF MI	Minus	***	T () A() 4		<b>!</b>	X42=		OR	X84=	
_	· into i rinese		III	ENDEN	· OLOGIN		<b>ا</b> ا	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										TOTAL		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
<u> </u>	l				<u>-</u>				•			

FORM PTO-875 (Rev. 8/01)

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERC

Customer No. 22,852

Attorney Docket No. 05725.0975-00

IITED STATES PATENT AND TRADEMARK OFFICE canned to Show fee

in re Application of:

Daniela GIACCHETTI et al.

Application No.: 10/024,622

Filed: December 21, 2001

HISTORICAL BEAUTY RECORD

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

For:

) Confirmation No.: 3918

Examiner: Borissov, Igor N.

## TRANSMITTAL LETTER

Enclosed is an Amendment responsive to the Office Action of May 5, 2004. Also enclosed is a Petition for a one-month extension of time to respond to the Office Action.

A claim fee is calculated below:

	Claims Remaining After Amendment		Highest Number Previously Paid	Present Extra	Rate	A	dditional Fee	
Total	61	-	52	9	x \$ 18	\$	162.00	
Indep.	11	-	11	0	x \$ 86		-0-	
☐ Firs	First Presentation of Multiple Dep. Claim(s) +\$290							
					Subtotal	\$	162.00	
	Reduction by ½ if small entity							
	TOTAL						162.00	

Enclosed is a check for \$272.00 to cover the \$162.00 claim fee and the \$110.00 extension of time fee.

Please grant any extensions of time required to enter this response and charge any additional required fees to our deposit account 06-0916.

Dated: September 3, 2004

Reg. No. 53,056

09/27/2004 SWILLIAM 00000002 060916 10024622

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290.00 DA